

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	213899.00020
		First Named Inventor	JACK BRASS, ET AL.
		COMPLETE IF KNOWN	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	Declaration Submitted after Initial Filing. Surcharge under 37 CFR 1.16(e) required.	Application Number	
		Filing Date	
		Art Unit	NYA
		Examiner Name	NYA

AS THE BELOW NAMED INVENTOR, I HEREBY DECLARE THAT:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LED INSPECTION LAMP AND LED SPOT LIGHT

☒ is attached hereto

or

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

PRIORITY INFORMATION:

I hereby claim domestic priority benefits under 35 USC 119(e) of any provisional application listed below.

I hereby claim domestic priority benefits under 35 USC 120 of any United States application, or 365(c) of any PCT international application designating the United States listed below.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application for patent, inventor's or plant breeder's rights certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Domestic or Foreign Application Number(s)	Country	Filing Date (MM/DD/YYYY)	Priority Claimed	Certified Copy Attached? (for FOREIGN only)	
				YES	NO
PCT/CA02/02020	PCT	Dec. 30, 2002	Yes		
10/029,803	USA	Dec. 31, 2001	Yes		
60/359,656	USA	Feb. 27, 2002	Yes		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ additional domestic and/or foreign application numbers are listed on a supplemental priority data sheet attached hereto.

DECLARATION - UTILITY OR DESIGN PATENT APPLICATION

CORRESPONDENCE ADDRESS:

Direct all correspondence to: ☒ Customer Number or Bar Code Label **27160** or ☐ Correspondence address below

Name

Address

City

State

Zip

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventorGiven Name (first and middle): **Jack**

Family Name or Surname:

BRASS

Inventor's Signature:

Date: **JUN 29 / 04****Residence:**City **Toronto**State **Ontario**Country **CANADA**Citizenship **CANADA****Mailing Address: Same as Residence**Street **96 Hillmount Ave.**City **North York**State **Ontario**

Zip

M1X 6B6

Country

CANADA**NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventorGiven Name (first and middle): **Richard J.**

Family Name or Surname:

Doran

Inventor's Signature:

Date:

Residence:City **Wrotham Heath**State **Kent**Country **United Kingdom****Mailing Address: Same as residence**Street **Ladylees**City **Wrotham Heath**State **Kent**

Zip

TN15 7SU

Country

United Kingdom**NAME OF THIRD INVENTOR:**☐ A petition has been filed for this unsigned inventorGiven Name (first and middle): **Donald L.**

Family Name or Surname:

KLIPSTEIN

Inventor's Signature:

Date:

Residence:City **Upper Darby**State **PA**Country **US**Citizenship **US****Mailing Address: Same as residence**Street **7200 Merion Terrace, Apt. B413**City **Upper Darby**State **PA**

Zip

19082

Country

US

X 1 Supplemental Additional Inventors(s) Sheets(s) are attached hereto.

DECLARATION - UTILITY OR DESIGN PATENT APPLICATION

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle): Jack

Family Name or Surname:

BRASS

Inventor's Signature:

Date:

Residence:

City Toronto

State Ontario

Country CANADA

Citizenship CANADA

Mailing Address: Same as Residence

Street 96 Hillmount Ave.

City North York

State Ontario

Zip M1X 66B

Country CANADA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle): Richard J.

Family Name or Surname:

Doran

Inventor's Signature:

Date:

29-JUNE-2004

Residence:

City Wrotham Heath

State Kent

Country United Kingdom

Mailing Address: Same as residence

Street Ladylees

City Wrotham Heath

State Kent

Zip TN15 7SU

Country United Kingdom

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle): Donald L.

Family Name or Surname:

KLIPSTEIN

Inventor's Signature:

Date:

Residence:

City Upper Darby

State PA

Country US

Citizenship US

Mailing Address: Same as residence

Street 7200 Merion Terrace, Apt. B413

City Upper Darby

State PA

Zip 19082

Country US

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name (first and middle): **Jack**Family Name or Surname: **BRASS**

Inventor's Signature:

Date:

Residence:

City **Toronto**State **Ontario**Country **CANADA**Citizenship **CANADA**

Mailing Address: Same as Residence

Street **96 Hillmount Ave.**City **North York**State **Ontario**Zip **M1X 66B**Country **CANADA**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name (first and middle): **Richard J.**Family Name or Surname: **Doran**

Inventor's Signature:

Date:

Residence:

City **Wrotham Heath**State **Kent**Country **United Kingdom**

Mailing Address: Same as residence

Street **Ladylees**City **Wrotham Heath**State **Kent**Zip **TN15 7SU**Country **United Kingdom**

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name (first and middle): **Donald L.**Family Name or Surname: **KLIPSTEIN**Inventor's Signature: **Donald L. Klipstein**Date: **6/28/04**

Residence:

City **Upper Darby**State **PA**Country **US**Citizenship **US**


Mailing Address: Same as residence

Street **7200 Merion Terrace, Apt. B413**City **Upper Darby**State **PA**Zip **19082**Country **US**

X 1 Supplemental Additional Inventors(s) Sheets(s) are attached hereto.

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
NAME OF ADDITIONAL INVENTOR: <u>4 D</u>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): <u>Thomas M.</u>		Family Name or Surname: <u>LEMONS</u>	
Inventor's Signature: <u>Thomas M. Lemos</u>		Date: <u>6/28/07</u>	
Residence:			
City <u>Marblehead</u>	State <u>MA</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address: Same as residence			
Street <u>14 Orme Street</u>			
City <u>Marblehead</u>	State <u>MA</u>	Zip <u>01945</u>	Country <u>US</u>
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): <u>Bjarki</u>		Family Name or Surname: <u>HALLGRIMSON</u>	
Inventor's Signature:		Date:	
Residence:			
City <u>Ottawa</u>	State <u>Ontario</u>	Country <u>CANADA</u>	Citizenship <u>CANADA</u>
Mailing Address: Same as residence			
Street <u>360 Summit Avenue</u>			
City <u>Ottawa</u>	State <u>Ontario</u>	Zip <u>K1H 5L9</u>	Country <u>CANADA</u>
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): <u>Sarah</u>		Family Name or Surname: <u>DOBBIN</u>	
Inventor's Signature:		Date:	
Residence:			
City <u>Ottawa</u>	State <u>Ontario</u>	Country <u>CANADA</u>	Citizenship <u>CANADA</u>
Mailing Address: Same as residence			
Street <u>89 Cambridge St. North #2</u>			
City <u>Ottawa</u>	State <u>Ontario</u>	Zip <u>K1R 7A6</u>	Country <u>CANADA</u>
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle):		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence:			
City	State	Country	Citizenship
Mailing Address: Same as residence			
Street			
City	State	Zip	Country

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): Thomas M.		Family Name or Surname: LEMONS	
Inventor's Signature:		Date:	
Residence:			
City Marblehead	State MA	Country US	Citizenship US
Mailing Address: Same as residence			
Street 14 One Street			
City Marblehead	State MA	Zip 01945	Country US
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): Ejarki		Family Name or Surname: HALLGRIMSON	
Inventor's Signature: <i>[Signature]</i>		Date: JUNE 29-04	
Residence:			
City Ottawa	State Ontario	Country CANADA	Citizenship CANADA
Mailing Address: Same as residence			
Street 360 Summit Avenue			
City Ottawa	State Ontario	Zip K1H 5L9	Country CANADA
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): Sarah		Family Name or Surname: DOBBIN	
Inventor's Signature:		Date:	
Residence:			
City Ottawa	State Ontario	Country CANADA	Citizenship CANADA
Mailing Address: Same as residence			
Street 89 Cambridge St. North #2			
City Ottawa	State Ontario	Zip K1R 7A6	Country CANADA
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle):		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence:			
City	State	Country	Citizenship
Mailing Address: Same as residence			
Street			
City	State	Zip	Country

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet	
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): Thomas M.		Family Name or Surname: LEMONS	
Inventor's Signature:		Date:	
Residence:			
City	Marblehead	State	MA
Country	US		Citizenship
Mailing Address: Same as residence			
Street 14 Orne Street			
City	Marblehead	State	MA
Zip	01945		Country
Country US			
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): Bjarki		Family Name or Surname: HALLGRIMSON	
Inventor's Signature:		Date:	
Residence:			
City	Ottawa	State	Ontario
Country	CANADA		Citizenship
Mailing Address: Same as residence			
Street 360 Summit Avenue			
City	Ottawa	State	Ontario
Zip	K1H 5L9		Country
Country CANADA			
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle): Sarah		Family Name or Surname: DOBBIN	
Inventor's Signature: 		Date: JUNE 28, 2004	
Residence:			
City	Ottawa	State	Ontario
Country	CANADA		Citizenship
Mailing Address: Same as residence			
Street 89 Cambridge St. North #2			
City	Ottawa	State	Ontario
Zip	K1R 7A6		Country
Country CANADA			
NAME OF ADDITIONAL INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle):		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence:			
City		State	
Country			Citizenship
Mailing Address: Same as residence			
Street			
City		State	
Zip			Country

10/500500

Rec'd PGT/PTO 30 JUN 2004

Please type a plus sign (+) inside this box 

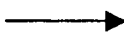
PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	
	Filing Date	06/30/2004
	First Named Inventor	JACK BRASS, ET AL.
	Title	LED INSPECTION LAMP AND LED SPOT LIGHT
	Group Art Unit	NYA
	Examiner Name	NYA
	Attorney Docket Number	213899.00020

I hereby appoint:

☒ Practitioners at Customer Number 27160  Place Customer Number
Bar Code Label here

OR

☐ Practitioner(s) named below:


Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number  Place Customer
Number Bar Code

OR

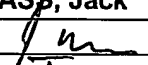
<input type="checkbox"/>	Firm or Individual Name				
Address					
Address					
City		State	Zip		
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	BRASS, Jack
Signature	
Date	JUNE 29/04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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Rec'd PST/PTO 30 JUN 2004

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PTO/SB/81 (02-01)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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	Filing Date	06/30/2004
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	Group Art Unit	NYA
	Examiner Name	NYA
	Attorney Docket Number	213899.00020

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Name	Registration Number

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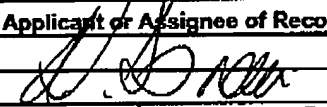
<input type="checkbox"/>	Firm or Individual Name				
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PT/USP/96).

SIGNATURE of Applicant or Assignee of Record

Name	DORAN, Richard, J.
Signature	
Date	29-JUNE-2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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10/500500
 Rec'd PCT/PTO 30 JUN 2004

Please type a plus sign (+) inside this box ☐

PTO/SB/81 (02/01)

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 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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	Filing Date	06/30/2004
	First Named Inventor	JACK BRASS, ET AL.
	Title	LED INSPECTION LAMP AND LED SPOT LIGHT
	Group Art Unit	NYA
	Examiner Name	NYA
	Attorney Docket Number	213899.00020

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☒ Practitioners at Customer Number Place Customer Number
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OR

☐ Practitioner(s) named below:

Name	Registration Number

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<input type="checkbox"/>	Firm or Individual Name				
Address					
Address					
City		State	Zip		
Country					
Telephone		Fax			

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	KLIPSTEIN, Donald, L.
Signature	<i>Donald L. Klipstein</i>
Date	6/28/04

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Please type a plus sign (+) inside this box 

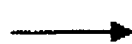
PTO/SB/81 (02-01)

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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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	Group Art Unit	NYA
	Examiner Name	NYA
	Attorney Docket Number	213899.00020

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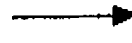
Name	Registration Number

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OR

☐ Practitioners at Customer Number 

OR

☐ Firm or Individual Name


Address	
Address	
City	State Zip
Country	
Telephone	Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).

SIGNATURE of Applicant or Assignee of Record

Name	LEMONS, Thomas, M.
Signature	
Date	JUN 28, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 6 forms are submitted.

30 JUN 2004

Please type a plus sign (+) inside this box ☐

PTO/88/81 (02-01)

Approved for use through 10/31/2002. OMB 0851-0038
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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	Group Art Unit	NYA
	Examiner Name	NYA
	Attorney Docket Number	213899.00020

I hereby appoint:

☒ Practitioners at Customer Number Place Customer Number Bar Code Label here

OR

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OR

☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/88).

SIGNATURE of Applicant or Assignee of Record

Name	HALLGRIMSON, Bjarki
Signature	<i>[Signature]</i>
Date	JUN 29 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/81 (02-01)

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	Group Art Unit	NYA
	Examiner Name	NYA
	Attorney Docket Number	213899.00020

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SIGNATURE of Applicant or Assignee of Record

Name	BOBBIN, Sarah
Signature	
Date	JUNE 28, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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